



(An Equal Opportunity Employer)

Employment Application

Please fill out accurately and as completely as possible. Incomplete applications will not be accepted.

APPLICANT INFORMATION

Last Name			First Name			M.I.		SS #	-	-
Street Address										
Town/City				State		Zip code				
Phone Number	()	Email Address								
Alternate Number	()	Emergency Contact					Phone Number	()		
Position Applied for				E. Contact Address				Relationship		
Are you a U.S. citizen or permanent resident alien with a legal right to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have you ever worked or volunteered for us in the past?			YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Can you, after employment, verify your legal right to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?							
Are you at least 18 years old?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Available dates		TO		Desired Salary			
How many total hours per week are you seeking?			Are you willing to work:	<input type="checkbox"/> Saturdays <input type="checkbox"/> Sundays <input type="checkbox"/> Holidays <input type="checkbox"/> Evenings						
Do you hold a valid driver's license? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, STATE OF ISSUE _____ DRIVER'S LICENSE # _____ <i>Out of state drivers will have to submit a copy of driving record from state of issue during the hiring process at applicants cost.</i>										

Have you ever been convicted of a crime (other than minor traffic violations) in the last 5 years? ☐ YES ☐ NO *If yes, please explain on a separate sheet of paper.*
 Please note that a conviction is not an automatic disqualifier of employment. Willful omission or misrepresentation is however, a basis for employment ineligibility.

EDUCATION

High School			Address							
Dates Attended		To	Degree/Certificate:				Special Courses:			
College/University			Address							
Dates Attended		To	Degree/Certificate:				Special Courses:			
College/University			Address							
Dates Attended		To	Degree/Certificate:				Special Courses:			

SKILLS

COMPUTER SKILLS:										
FOREIGN LANGUAGE (SPEAK, READ AND/OR WRITE) SKILLS:	<input type="checkbox"/> ENGLISH <input type="checkbox"/> SPANISH <input type="checkbox"/> FRENCH <input type="checkbox"/> SIGN LANGUAGE <input type="checkbox"/> OTHER 1: _____									
OTHER CERTIFICATES, INTERNSHIPS, TRAINING OR SKILLS:										
PUBLIC SPEAKING EXPERIENCE/SKILLS:										

ARE YOU CPR/FIRST AID CERTIFIED? ☐ YES ☐ NO **NOTE: APPLICANTS MUST BE CERTIFIED PRIOR TO STARTING EMPLOYMENT DATE**
 If course is offered on-site, applicants will be certified on-site. Otherwise applicants are responsible for certification prior to employment with reimbursement by MSA.

REFERENCES

Please list 3 professional & personal references (family members are excluded) who have known you for at least 1 year. May also attach letters of recommendation. Make sure to inform references about potential contact by employer.

Full Name		Title/Position			
Company		Phone #	()	Years Known	
Address		Email Address			
Full Name		Title/Position			
Company		Phone #	()	Years Known	
Address		Email Address			
Full Name		Title/Position			
Company		Phone #	()	Years Known	
Address		Email Address			

PREVIOUS EMPLOYMENT

1	Company		Phone Number	()			
Address			Supervisor				
Position			Starting Salary		Final Salary		
Responsibilities:						Hours per week	
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If not, why?		
2	Company		Phone Number	()			
Address			Supervisor				
Job Title			Starting Salary		Final Salary		
Responsibilities:						Hours per week	
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If not, why?		
3	Company		Phone Number	()			
Address			Supervisor				
Job Title			Starting Salary		Final Salary		
Responsibilities:						Hours per week	
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If not, why?		
<p>FOR MORE SPECIFIC JOB HISTORY, PLEASE ATTACH COMPLETED RESUME</p>							

QUESTION: Please type answers on a separate piece of paper- handwritten answers are not acceptable.

A) Why do you think you are the best candidate for the aquarium?

Highlight any relevant accomplishments or personal experience, which doesn't need to be of a paid nature, and may include special interests.

B) If hired, what do you hope to gain most from the opportunity?

Highlight your goals and skills you wish to acquire, as well as how you will benefit from this experience.

IF THE POSITION YOU APPLIED FOR IS NOT AVAILABLE, WOULD YOU LIKE TO BE CONSIDERED FOR OUR VOLUNTEER OPPORTUNITIES?

☐ YES ☐ NO

ARE YOU SEEKING TO USE THIS OPPORTUNITY FOR INTERNSHIP CREDITS OR WORK-STUDY HOURS? ☐ YES ☐ NO

I HAVE READ AND UNDERSTAND THE NATURE OF THE POSITION I AM APPLYING FOR AND THE DUTIES ASSOCIATED WITH IT AND IF HIRED, I ATTEST THAT I CAN PERFORM THE REQUIRED FUNCTIONS AND DUTIES OF MY JOB TO THE BEST OF MY ABILITIES, WITH OR WITHOUT REASONABLE ACCOMODATION.

☐ YES ☐ NO

DISCLAIMER AND SIGNATURE

Please read and sign the following statement: I certify, under penalty of law, that the information given in this application is correct and complete to the best of my knowledge. I am aware that, should investigation at any time show falsification, I will not be considered for employment or, if employed, I may be dismissed. I hereby authorize the Maine State Aquarium and agencies with whom my name is certified/referred to make all necessary investigations concerning me, my work habits, previous employment or experience, and other situations as are applicable to the position I am applying for. I authorize the Maine State Aquarium to check my driving record if the position for which I am applying requires driving. I authorize the Maine State Aquarium to receive and make available to other relevant agencies my academic records or other materials, pertinent to my qualifications, and further authorize and request each former employer, persons given as reference, educational institutions, or organizations (including law enforcement agencies) to provide all information that may be sought in connection with my application. With this permission I release the organization from any liability as a result of such contact. Finally, I understand and agree that I will be required to ratify the information contained in this application by signature as a condition of employment.

Signature

Date

SUBMISSION DEADLINE: FEBRUARY 19, 2010

Please submit your completed application, with appropriate copies of verification materials (*transcripts, certifications, education & training documentation, diplomas, etc., as applicable*), with your cover letter and resume to:

Maine State Aquarium
ATTN: Aimee Hayden-Roderiques
RE: Application Materials
PO BOX 8
West Boothbay Harbor, ME 04575

If you have any further questions, please contact me at (207) 633-9542.

Aimee Hayden-Roderiques
Natural Science Educator
Maine State Aquarium
Department of Marine Resources- *Education Division*
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